

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Baxter Healthcare Political Action Committee

ADDRESS (number and street)

1501 K Street, NW

☒ XCheck if different
than previously
reported. (ACC)

Washington

DC

20005

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00117838

3. IS THIS
REPORT☒ XNEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

- ☐ April 15
Quarterly Report(Q1)
- ☐ July 15
Quarterly Report(Q2)
- ☐ October 15
Quarterly Report(Q3)
- ☐ January 31
Quarterly Report(YE)
- ☐ July 31 Mid-Year
Report(Non-election
Year Only) (MY)
- ☐ Termination Report
(TER)

(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☒ X

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post -Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

08

01

2006

through

08

31

2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Sarah Creviston

Signature of Treasurer

Electronically Filed by Sarah Creviston

Date

09

05

2006

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Baxter Healthcare Political Action Committee

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	8	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
0	8	3	1	2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2006		43452.73
(b) Cash on Hand at Beginning of Reporting Period	46265.05	
(c) Total Receipts (from Line 19)	7776.65	56588.97
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	54041.70	100041.70
7. Total Disbursements (from Line 31)	2000.00	48000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	52041.70	52041.70
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

Baxter Healthcare Political Action Committee

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	8	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
0	8	3	1	2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	7776.65	56588.97
(i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized	7776.65	56588.97
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➡	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ➡	7776.65	56588.97
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	7776.65	56588.97
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	7776.65	56588.97

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)	0.00	0.00
(i) Federal Share.....		
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2000.00	48000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	2000.00	48000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	2000.00	48000.00

DETAILED SUMMARY PAGE

of Disbursements

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Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	7776.65	56588.97
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	7776.65	56588.97
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A. Full Name (Last, First, Middle Initial)
Jennifer Adams
Mailing Address 203 Bridle Path Lane

City State Zip Code
Fox River Grove IL 60021

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation
VP I, Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

170.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 1 / 2 0 0 6

Transaction ID: 60901.C29861

Amount of Each Receipt this Period

20.00

Receipt

Payroll Deduction: (10.00-
/Pay Period)

B. Full Name (Last, First, Middle Initial)
Joy A Amundson
Mailing Address 110 W. Onwentsia Road

City State Zip Code
Lake Forest IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation
CVP, Pres BioScience

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3295.60

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 1 / 2 0 0 6

Transaction ID: 60901.C29868

Amount of Each Receipt this Period

390.00

Receipt

Payroll Deduction: (195.0-
0/Pay Period)

C. Full Name (Last, First, Middle Initial)
Robert H Armstrong
Mailing Address 133 Manchester Drive

City State Zip Code
Waukesha WI 53188

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation
VP, R & D Medical Devices

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 1 / 2 0 0 6

Transaction ID: 60901.C29872

Amount of Each Receipt this Period

100.00

Receipt

Payroll Deduction: (50.00-
/Pay Period)

SUBTOTAL of Receipts This Page (optional)

510.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A. Full Name (Last, First, Middle Initial) Michael Barlev Mailing Address 61 Telegraph Hill Rd. City State Zip Code Holmdel NJ 07733 FEC ID number of contributing federal political committee. C Name of Employer Baxter Healthcare Corporation Occupation Sales Rep III Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 17.00		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6 Transaction ID: 60901.C29860 Amount of Each Receipt this Period 2.00 Receipt Payroll Deduction: (1.00/- Pay Period)
B. Full Name (Last, First, Middle Initial) Michael J Baughman Mailing Address 5343 N Lakewood Avenue City State Zip Code Chicago IL 60640 FEC ID number of contributing federal political committee. C Name of Employer Baxter International Inc. Occupation CVP, Controller Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1500.00		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6 Transaction ID: 60901.C29890 Amount of Each Receipt this Period 200.00 Receipt Payroll Deduction: (100.0-0/Pay Period)
C. Full Name (Last, First, Middle Initial) Armando Bombino Mailing Address 1795 Ashford Lane City State Zip Code Crystal Lake IL 60014 FEC ID number of contributing federal political committee. C Name of Employer Baxter Healthcare Corporation Occupation Dir, Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 85.00		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6 Transaction ID: 60901.C29859 Amount of Each Receipt this Period 10.00 Receipt Payroll Deduction: (5.00/- Pay Period)

SUBTOTAL of Receipts This Page (optional)

212.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A. Full Name (Last, First, Middle Initial) Pat Brower Mailing Address 502 Canal City Cleveland State MS Zip Code 38732 FEC ID number of contributing federal political committee. C Name of Employer Baxter Healthcare Corporation Occupation Mgr I, Distribution Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 17.00			Date of Receipt MM / DD / YYYY 08 / 11 / 2006 Transaction ID: 60901.C29846 Amount of Each Receipt this Period 2.00 Receipt Payroll Deduction: (1.00/- Pay Period)
B. Full Name (Last, First, Middle Initial) Michael Brown Mailing Address 531 Lyon Dr City Buffalo Grove State IL Zip Code 60089 FEC ID number of contributing federal political committee. C Name of Employer Baxter International Inc. Occupation Dir, Finance Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 17.00			Date of Receipt MM / DD / YYYY 08 / 11 / 2006 Transaction ID: 60901.C29887 Amount of Each Receipt this Period 2.00 Receipt Payroll Deduction: (1.00/- Pay Period)
C. Full Name (Last, First, Middle Initial) Sebastian Bufalino Mailing Address 1091 Pine Meadow Ct City Vernon Hills State IL Zip Code 60061 FEC ID number of contributing federal political committee. C Name of Employer Baxter International Inc. Occupation VP, Corporate Audit Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 139.65			Date of Receipt MM / DD / YYYY 08 / 11 / 2006 Transaction ID: 60901.C29901 Amount of Each Receipt this Period 93.10 Receipt Payroll Deduction: (46.55/- Pay Period)

SUBTOTAL of Receipts This Page (optional)

97.10

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
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FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A. Full Name (Last, First, Middle Initial) Glenn Burney		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address 96 Rock Creek Drive		Transaction ID: 60901.C29844
City Mountain Home	State AR	Zip Code 72653
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 4.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation Dir, Quality	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 34.00	Payroll Deduction: (2.00/- Pay Period)

B. Full Name (Last, First, Middle Initial) Donna Campagna		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address 30922 St Andrews Drive		Transaction ID: 60901.C29866
City Libertyville	State IL	Zip Code 60048
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation VP, Baxter IT	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	Payroll Deduction: (20.00- /Pay Period)

C. Full Name (Last, First, Middle Initial) John Cone		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address 153 Pleasant Valley Drive		Transaction ID: 60901.C29853
City Marion	State NC	Zip Code 28752
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 4.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation Sr Principal Engineer	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 34.00	Payroll Deduction: (2.00/- Pay Period)

SUBTOTAL of Receipts This Page (optional)

48.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A. Full Name (Last, First, Middle Initial)
Edward Conrad

Mailing Address 113 S Waverly Pl

City State Zip Code
Mt Prospect IL 60056

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter International Inc.

Occupation
Dir, Tax

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1001.09

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 1 / 2 0 0 6

Transaction ID: 60901.C29888

Amount of Each Receipt this Period

119.06

Receipt

Payroll Deduction: (59.53-
/Pay Period)

B. Full Name (Last, First, Middle Initial)
Sarah Creviston

Mailing Address 717 North Maple Ave.

City State Zip Code
Palatine IL 60067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation
VP, Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1264.96

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 1 / 2 0 0 6

Transaction ID: 60901.C29883

Amount of Each Receipt this Period

151.36

Receipt

Payroll Deduction: (75.68-
/Pay Period)

C. Full Name (Last, First, Middle Initial)
Margarita Cruz-casse

Mailing Address Violeta 153, San Francisco

City State Zip Code
San Juan PR 00927

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Puerto
Rico

Occupation
Dir, Logistics

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

664.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 1 / 2 0 0 6

Transaction ID: 60901.C29904

Amount of Each Receipt this Period

79.96

Receipt

Payroll Deduction: (39.98-
/Pay Period)

SUBTOTAL of Receipts This Page (optional)

350.38

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A. Full Name (Last, First, Middle Initial)
Robert M Davis
Mailing Address 21515 Hummingbird Court

City State Zip Code
Kildeer IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter International Inc.

Occupation
CVP, Chief Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1409.11

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 1 / 2 0 0 6

Transaction ID: 60901.C29891

Amount of Each Receipt this Period

230.76

Receipt

Payroll Deduction: (115.3-
8/Pay Period)

B. Full Name (Last, First, Middle Initial)
Gonz lez Chevalier Denisse
Mailing Address PO Box 363326

City State Zip Code
San Juan PR 00936-326

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter S. & D. Puerto Rico

Occupation
Mgr, Region

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

120.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 1 / 2 0 0 6

Transaction ID: 60901.C29905

Amount of Each Receipt this Period

40.00

Receipt

Payroll Deduction: (20.00-
/Pay Period)

C. Full Name (Last, First, Middle Initial)
Karen Dewey
Mailing Address 92 Spring Valley Drive

City State Zip Code
Mtn Home AR 72653

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation
Planner II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

34.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 1 / 2 0 0 6

Transaction ID: 60901.C29838

Amount of Each Receipt this Period

4.00

Receipt

Payroll Deduction: (2.00/-
Pay Period)

SUBTOTAL of Receipts This Page (optional)

274.76

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mayra Diaz-jimenez

Mailing Address Estancias De San Fernando Calle 7

City State Zip Code
 Carolina PR 00985

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter S. & D. Puerto Rico

Occupation
Mgr I, Reg Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 1 1 / 2 0 0 6

Transaction ID: 60901.C29906

Amount of Each Receipt this Period

40.00

Receipt

Payroll Deduction: (20.00-
/Pay Period)

Full Name (Last, First, Middle Initial)

B. Frederick Dodge

Mailing Address 233 Mtn St

City State Zip Code
 Marion NC 28752

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation
Sr Principal Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

17.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 1 1 / 2 0 0 6

Transaction ID: 60901.C29847

Amount of Each Receipt this Period

2.00

Receipt

Payroll Deduction: (1.00/-
Pay Period)

Full Name (Last, First, Middle Initial)

C. Paul Estrem

Mailing Address 325 Clarewood Circle

City State Zip Code
 Grayslake IL 60030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation
VP II, Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 2 5 / 2 0 0 6

Transaction ID: 60901.C29939

Amount of Each Receipt this Period

50.00

Receipt

Payroll Deduction: (50.00-
/Pay Period)

SUBTOTAL of Receipts This Page (optional)

92.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A. Full Name (Last, First, Middle Initial) Mary Fernald Mailing Address 36 Wagner Lane City Hillsborough State NJ Zip Code 08844 FEC ID number of contributing federal political committee. C Name of Employer Baxter Healthcare Corporation Occupation Mgr, Region Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 85.00		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 1 / 2 0 0 6 Transaction ID: 60901.C29865 Amount of Each Receipt this Period 10.00 Receipt Payroll Deduction: (5.00/- Pay Period)
B. Full Name (Last, First, Middle Initial) Rodney Foster Mailing Address 1979 N. Trevino Terrace City Vernon Hills State IL Zip Code 60061 FEC ID number of contributing federal political committee. C Name of Employer Baxter Healthcare Corporation Occupation Sr Dir, Engineering Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 64.00		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 1 / 2 0 0 6 Transaction ID: 60901.C29840 Amount of Each Receipt this Period 4.00 Receipt Payroll Deduction: (4.00/- Pay Period)
C. Full Name (Last, First, Middle Initial) Kevin Freeman Mailing Address 832 Foxmoor Lane City Lake Zurich State IL Zip Code 60047 FEC ID number of contributing federal political committee. C Name of Employer Baxter Healthcare Corporation Occupation VP I, Finance Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 793.10		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 1 / 2 0 0 6 Transaction ID: 60901.C29863 Amount of Each Receipt this Period 106.44 Receipt Payroll Deduction: (53.22/- Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		120.44
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A. Full Name (Last, First, Middle Initial) Elizabeth Fuller Mailing Address 975 Seaboard Ave City Atlanta State GA Zip Code 30318 FEC ID number of contributing federal political committee. C Name of Employer Baxter Healthcare Corporation Occupation Mgr, State Government Affairs Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 130.45		Date of Receipt MM / DD / YYYY 08 / 11 / 2006 Transaction ID: 60901.C29877 Amount of Each Receipt this Period 16.22 Receipt Payroll Deduction: (8.11/- Pay Period)
B. Full Name (Last, First, Middle Initial) James Gatling Mailing Address 3704 Lindsay Ln City Crystal Lake State IL Zip Code 60014 FEC ID number of contributing federal political committee. C Name of Employer Baxter Healthcare Corporation Occupation CVP, Global Manufacturing Ops Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2230.40		Date of Receipt MM / DD / YYYY 08 / 11 / 2006 Transaction ID: 60901.C29845 Amount of Each Receipt this Period 273.08 Receipt Payroll Deduction: (136.5-4/Pay Period)
C. Full Name (Last, First, Middle Initial) Juan Gonzalez Mailing Address 17842 Rachel Lane City Orland Park State IL Zip Code 60467 FEC ID number of contributing federal political committee. C Name of Employer Baxter Healthcare Corporation Occupation Project Mgr I, IT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 85.00		Date of Receipt MM / DD / YYYY 08 / 11 / 2006 Transaction ID: 60901.C29855 Amount of Each Receipt this Period 10.00 Receipt Payroll Deduction: (5.00/- Pay Period)

SUBTOTAL of Receipts This Page (optional)

299.30

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

Full Name (Last, First, Middle Initial)

A. John Greisch

Mailing Address 2636 Chesapeake Lane

City State Zip Code
 Northbrook IL 60062

FEC ID number of contributing federal political committee.

C

Name of Employer
Baxter International Inc.Occupation
CVP, President - International

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3660.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 8 / 1 1 / 2 0 0 6

Transaction ID: 60901.C29902

Amount of Each Receipt this Period

440.00

Receipt

Payroll Deduction: (220.0-
0/Pay Period)

Full Name (Last, First, Middle Initial)

B. Lawrence Guiheen

Mailing Address 1653 Vista Oaks Way

City State Zip Code
 Westlake Village CA 91361

FEC ID number of contributing federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tionOccupation
President V

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

595.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 8 / 1 1 / 2 0 0 6

Transaction ID: 60901.C29836

Amount of Each Receipt this Period

70.00

Receipt

Payroll Deduction: (35.00-
/Pay Period)

Full Name (Last, First, Middle Initial)

C. Worth Holder Jr

Mailing Address 42 Jamestown Court

City State Zip Code
 Grayslake IL 60030

FEC ID number of contributing federal political committee.

C

Name of Employer
Baxter International Inc.Occupation
VP II, Business Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

128.49

Date of Receipt

M M / D D / Y Y Y Y Y
 0 8 / 1 1 / 2 0 0 6

Transaction ID: 60901.C29899

Amount of Each Receipt this Period

85.66

Receipt

Payroll Deduction: (42.83-
/Pay Period)

SUBTOTAL of Receipts This Page (optional)

595.66

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

Full Name (Last, First, Middle Initial)

A. Stephen Irby

Mailing Address 601 Baxter Avenue

City State Zip Code
 Mtn Home AR 72653

FEC ID number of contributing federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tionOccupation
Sr Planner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

34.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 8 / 1 1 / 2 0 0 6

Transaction ID: 60901.C29839

Amount of Each Receipt this Period

4.00

Receipt

Payroll Deduction: (2.00/-
Pay Period)

Full Name (Last, First, Middle Initial)

B. Irene Jakimcius

Mailing Address 2208 Wesley Ave.

City State Zip Code
 Evanston IL 60201

FEC ID number of contributing federal political committee.

C

Name of Employer
Baxter International Inc.Occupation
Assoc General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

182.73

Date of Receipt

M M / D D / Y Y Y Y Y
 0 8 / 1 1 / 2 0 0 6

Transaction ID: 60901.C29894

Amount of Each Receipt this Period

121.82

Receipt

Payroll Deduction: (60.91-
/Pay Period)

Full Name (Last, First, Middle Initial)

C. James Kamienski

Mailing Address 6312 N Keating

City State Zip Code
 Chicago IL 60646

FEC ID number of contributing federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tionOccupation
VP II, Manufacturing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

847.73

Date of Receipt

M M / D D / Y Y Y Y Y
 0 8 / 1 1 / 2 0 0 6

Transaction ID: 60901.C29848

Amount of Each Receipt this Period

100.94

Receipt

Payroll Deduction: (50.47-
/Pay Period)

SUBTOTAL of Receipts This Page (optional)

226.76

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A. Full Name (Last, First, Middle Initial)

Robert Keeley

Mailing Address 22606 Bridle

City State Zip Code
 Kildeer IL 60047

FEC ID number of contributing federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tionOccupation
VP II, Business Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

45.41

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 2 5 / 2 0 0 6

Transaction ID: 60901.C29948

Amount of Each Receipt this Period

45.41

Receipt

Payroll Deduction: (45.41-
/Pay Period)

B. Full Name (Last, First, Middle Initial)

Jane Kiernan

Mailing Address 525 W. Roscoe, #3W

City State Zip Code
 Chicago IL 60657

FEC ID number of contributing federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tionOccupation
General Manager I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

120.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 1 1 / 2 0 0 6

Transaction ID: 60901.C29864

Amount of Each Receipt this Period

80.00

Receipt

Payroll Deduction: (40.00-
/Pay Period)

C. Full Name (Last, First, Middle Initial)

Carol Lampe

Mailing Address 303 Northwind Dr.

City State Zip Code
 Lake Villa IL 60046

FEC ID number of contributing federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tionOccupation
Sr Research Scientist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

17.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 1 1 / 2 0 0 6

Transaction ID: 60901.C29856

Amount of Each Receipt this Period

2.00

Receipt

Payroll Deduction: (1.00/-
Pay Period)

SUBTOTAL of Receipts This Page (optional)

127.41

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A. Full Name (Last, First, Middle Initial)
Edward A Langan
Mailing Address 1605 Highland Avenue

City State Zip Code
Wilmette IL 60091

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation
VP II, Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 1 / 2 0 0 6

Transaction ID: 60901.C29834

Amount of Each Receipt this Period

150.00

Receipt

Payroll Deduction: (75.00-
/Pay Period)

B. Full Name (Last, First, Middle Initial)
Susan R Lichtenstein
Mailing Address 1257 W Wrightwood Ave

City State Zip Code
Chicago IL 60614

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter International Inc.

Occupation
CVP, General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3190.75

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 1 / 2 0 0 6

Transaction ID: 60901.C29892

Amount of Each Receipt this Period

378.46

Receipt

Payroll Deduction: (189.2-
3/Pay Period)

C. Full Name (Last, First, Middle Initial)
Gary Loudermilk
Mailing Address 570 S Creek Rd

City State Zip Code
Nebo NC 28761

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation
Supt, Manufacturing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

34.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 1 / 2 0 0 6

Transaction ID: 60901.C29852

Amount of Each Receipt this Period

4.00

Receipt

Payroll Deduction: (2.00/-
Pay Period)

SUBTOTAL of Receipts This Page (optional)

532.46

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A. Full Name (Last, First, Middle Initial)
 Matthew Lykken
 Mailing Address 421 North Wheaton Ave

City State Zip Code
 Wheaton IL 60187

FEC ID number of contributing federal political committee.

C

Name of Employer
Baxter International Inc.Occupation
VP, Tax

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

708.97

Date of Receipt

M M / D D / Y Y Y Y Y
 0 8 / 1 1 / 2 0 0 6

Transaction ID: 60901.C29900

Amount of Each Receipt this Period

101.92

Receipt

Payroll Deduction: (50.96-
/Pay Period)

B. Full Name (Last, First, Middle Initial)
 Brian W Magerkurth
 Mailing Address 4218 Third Street Lane NW

City State Zip Code
 Hickory NC 28601

FEC ID number of contributing federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tionOccupation
VP II, Global Supply Chain

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

819.38

Date of Receipt

M M / D D / Y Y Y Y Y
 0 8 / 1 1 / 2 0 0 6

Transaction ID: 60901.C29869

Amount of Each Receipt this Period

110.52

Receipt

Payroll Deduction: (55.26-
/Pay Period)

C. Full Name (Last, First, Middle Initial)
 Teresita Martinez-santini
 Mailing Address A-1 Atenas St Repto Flamingo

City State Zip Code
 Bayamon PR 00959

FEC ID number of contributing federal political committee.

C

Name of Employer
Baxter Healthcare Puerto
RicoOccupation
Dir, Quality

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

665.67

Date of Receipt

M M / D D / Y Y Y Y Y
 0 8 / 1 1 / 2 0 0 6

Transaction ID: 60901.C29903

Amount of Each Receipt this Period

88.62

Receipt

Payroll Deduction: (44.31-
/Pay Period)

SUBTOTAL of Receipts This Page (optional)

301.06

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A. Full Name (Last, First, Middle Initial)

John Martino

Mailing Address 104 Dumont Dr

City State Zip Code
Morganton NC 28655

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation
Dir, Quality

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

17.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 1 / 2 0 0 6

Transaction ID: 60901.C29841

Amount of Each Receipt this Period

2.00

Receipt

Payroll Deduction: (1.00/-
Pay Period)

B. Full Name (Last, First, Middle Initial)

Jeanne K Mason

Mailing Address 1 Baxter Parkway DF 1-2E

City State Zip Code
Deerfield IL 60015

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter International Inc.

Occupation
CVP, HR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.55

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 1 / 2 0 0 6

Transaction ID: 60901.C29897

Amount of Each Receipt this Period

307.70

Receipt

Payroll Deduction: (153.8-
5/Pay Period)

C. Full Name (Last, First, Middle Initial)

Kevin Mcculloch

Mailing Address 730 Greenwood Avenue

City State Zip Code
Wilmette IL 60091

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation
General Manager III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

881.68

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 1 / 2 0 0 6

Transaction ID: 60901.C29879

Amount of Each Receipt this Period

105.76

Receipt

Payroll Deduction: (52.88-
/Pay Period)

SUBTOTAL of Receipts This Page (optional)

415.46

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A. Full Name (Last, First, Middle Initial)

Bruce Mcgillivray

Mailing Address 151 Ridge Lane

City State Zip Code
 Lake Forest IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation
CVP, President Renal

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2010.06

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 1 1 / 2 0 0 6

Transaction ID: 60901.C29875

Amount of Each Receipt this Period

269.24

Receipt

Payroll Deduction: (134.6-
2/Pay Period)

B. Full Name (Last, First, Middle Initial)

Donald Mcpeters

Mailing Address 119 North Hills Drive

City State Zip Code
 Marion NC 28752

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation
Supv II, Manufacturing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

17.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 1 1 / 2 0 0 6

Transaction ID: 60901.C29851

Amount of Each Receipt this Period

2.00

Receipt

Payroll Deduction: (1.00/-
Pay Period)

C. Full Name (Last, First, Middle Initial)

Victor Miller

Mailing Address 230 9th Street

City State Zip Code
 Wilmette IL 60091

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation
Dir, Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

65.45

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 1 1 / 2 0 0 6

Transaction ID: 60901.C29878

Amount of Each Receipt this Period

7.70

Receipt

Payroll Deduction: (3.85/-
Pay Period)

SUBTOTAL of Receipts This Page (optional)

278.94

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A. Full Name (Last, First, Middle Initial)
Frank Monteleone
Mailing Address 4620 Forest Edge Lane

City State Zip Code
Long Grove IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation
VP, Baxter IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1099.56

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 1 / 2 0 0 6

Transaction ID: 60901.C29881

Amount of Each Receipt this Period

130.92

Receipt

Payroll Deduction: (65.46-
/Pay Period)

B. Full Name (Last, First, Middle Initial)
Barbara Morris
Mailing Address 924 N. Saratoga Dr.

City State Zip Code
Palatine IL 60074

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation
VP II, HR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

170.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 1 / 2 0 0 6

Transaction ID: 60901.C29854

Amount of Each Receipt this Period

20.00

Receipt

Payroll Deduction: (10.00-
/Pay Period)

C. Full Name (Last, First, Middle Initial)
Richard Moss
Mailing Address 1620 Waukegan Rd

City State Zip Code
McGaw Park IL 60085

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation
VP, Strategy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

150.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 1 / 2 0 0 6

Transaction ID: 60901.C29873

Amount of Each Receipt this Period

100.00

Receipt

Payroll Deduction: (50.00-
/Pay Period)

SUBTOTAL of Receipts This Page (optional)

250.92

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

Full Name (Last, First, Middle Initial)

A. Timothy Murphy

Mailing Address 14601 N Somerset Circle

City

Libertyville

State

IL

Zip Code

60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation

Asst General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.17

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 1 / 2 0 0 6

Transaction ID: 60901.C29880

Amount of Each Receipt this Period

45.00

Receipt

Payroll Deduction: (22.50-
/Pay Period)

Full Name (Last, First, Middle Initial)

B. Peter Omalley

Mailing Address 563 Greenway Drive

City

Lake Forest

State

IL

Zip Code

60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation

VP/GM II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

765.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 1 / 2 0 0 6

Transaction ID: 60901.C29884

Amount of Each Receipt this Period

90.00

Receipt

Payroll Deduction: (45.00-
/Pay Period)

Full Name (Last, First, Middle Initial)

C. Shannon W. Penberthy

Mailing Address 3214 Porter Street, NW

City

Washington

State

DC

Zip Code

20008

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation

Dir, Govt Aff & Public Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 1 / 2 0 0 6

Transaction ID: 60901.C29870

Amount of Each Receipt this Period

160.00

Receipt

Payroll Deduction: (80.00-
/Pay Period)

SUBTOTAL of Receipts This Page (optional)

295.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A. Full Name (Last, First, Middle Initial) Carla Pittman Mailing Address 5720 Shenandoah Avenue City State Zip Code Los Angeles CA 90056 FEC ID number of contributing federal political committee. C Name of Employer Baxter Healthcare Corpora- tion Occupation Sr Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 869.55			Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 1 / 2 0 0 6 Transaction ID: 60901.C29876 Amount of Each Receipt this Period 103.50 Receipt Payroll Deduction: (51.75- /Pay Period)
B. Full Name (Last, First, Middle Initial) Virginia Pringle Mailing Address 341 3rd Street West City State Zip Code Tierra Verde FL 33715 FEC ID number of contributing federal political committee. C Name of Employer Baxter Healthcare Corpora- tion Occupation Mgr II, Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 480.97			Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 1 / 2 0 0 6 Transaction ID: 60901.C29858 Amount of Each Receipt this Period 57.46 Receipt Payroll Deduction: (28.73- /Pay Period)
C. Full Name (Last, First, Middle Initial) Neervalur Raghavan Mailing Address 2327 Castilian City State Zip Code Northbrook IL 60062 FEC ID number of contributing federal political committee. C Name of Employer Baxter Healthcare Corpora- tion Occupation VP I, Research Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 85.00			Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 1 / 2 0 0 6 Transaction ID: 60901.C29857 Amount of Each Receipt this Period 10.00 Receipt Payroll Deduction: (5.00/- Pay Period)

SUBTOTAL of Receipts This Page (optional)

170.96

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A. Full Name (Last, First, Middle Initial) Elizabeth Redd Mailing Address 604 South Leflore City Cleveland State MS Zip Code 38732 FEC ID number of contributing federal political committee. C			Date of Receipt MM / DD / YYYY 08 / 11 / 2006 Transaction ID: 60901.C29843 Amount of Each Receipt this Period 2.00 Receipt Payroll Deduction: (1.00/- Pay Period)
B. Full Name (Last, First, Middle Initial) David Rohrbach Mailing Address 10 Hawkes Court City Bridgewater State NJ Zip Code 08807 FEC ID number of contributing federal political committee. C			Date of Receipt MM / DD / YYYY 08 / 11 / 2006 Transaction ID: 60901.C29874 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
C. Full Name (Last, First, Middle Initial) Roibin Ryan Mailing Address 1419 W Berteau City Chicago State IL Zip Code 60613 FEC ID number of contributing federal political committee. C			Date of Receipt MM / DD / YYYY 08 / 11 / 2006 Transaction ID: 60901.C29895 Amount of Each Receipt this Period 173.08 Receipt Payroll Deduction: (86.54- /Pay Period)
SUBTOTAL of Receipts This Page (optional)			195.08
TOTAL This Period (last page this line number only)			

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A. Full Name (Last, First, Middle Initial) Harold Sargent Mailing Address 1151 Woodview Drive City State Zip Code Green Oaks IL 60048 FEC ID number of contributing federal political committee. C Name of Employer Baxter Healthcare Corporation Occupation Sr Dir, Research Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 34.00		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6 Transaction ID: 60901.C29837 Amount of Each Receipt this Period 4.00 Receipt Payroll Deduction: (2.00/- Pay Period)
B. Full Name (Last, First, Middle Initial) David P Scharf Mailing Address 931 Oak Street City State Zip Code Winnetka IL 60093 FEC ID number of contributing federal political committee. C Name of Employer Baxter International Inc. Occupation CVP, Corporate Secretary Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 602.16		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6 Transaction ID: 60901.C29893 Amount of Each Receipt this Period 88.66 Receipt Payroll Deduction: (44.33- Pay Period)
C. Full Name (Last, First, Middle Initial) Michael Schiffer Mailing Address 33741 Shackleton Isle City State Zip Code Monarch Beach CA 92629 FEC ID number of contributing federal political committee. C Name of Employer Baxter Healthcare Corporation Occupation Assoc General Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1171.59		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6 Transaction ID: 60901.C29867 Amount of Each Receipt this Period 139.50 Receipt Payroll Deduction: (69.75- Pay Period)

SUBTOTAL of Receipts This Page (optional)

232.16

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A. Full Name (Last, First, Middle Initial)

Victor Schmitt

Mailing Address 699 Bluff Road

City State Zip Code
 Lake Bluff IL 60044

FEC ID number of contributing federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tionOccupation
Pres, Venture Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

654.50

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 1 1 / 2 0 0 6

Transaction ID: 60901.C29862

Amount of Each Receipt this Period

77.00

Receipt

Payroll Deduction: (38.50-
/Pay Period)

B. Full Name (Last, First, Middle Initial)

Chandra Sekhar

Mailing Address 1621 Mission Hills Rd Unit 211

City State Zip Code
 Northbrook IL 60062

FEC ID number of contributing federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tionOccupation
VP II, Mfg Strategic Planning

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

738.40

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 1 1 / 2 0 0 6

Transaction ID: 60901.C29835

Amount of Each Receipt this Period

102.04

Receipt

Payroll Deduction: (51.02-
/Pay Period)

C. Full Name (Last, First, Middle Initial)

Deborah Spak

Mailing Address 1555 Stratford

City State Zip Code
 Deerfield IL 60015

FEC ID number of contributing federal political committee.

C

Name of Employer
Baxter International Inc.Occupation
Dir, Communications

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

195.35

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 1 1 / 2 0 0 6

Transaction ID: 60901.C29898

Amount of Each Receipt this Period

23.30

Receipt

Payroll Deduction: (11.65-
/Pay Period)

SUBTOTAL of Receipts This Page (optional)

202.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A. Full Name (Last, First, Middle Initial) Edward Sudlow Mailing Address 2406 N Hickory City State Zip Code Arlington Heights IL 60004 FEC ID number of contributing federal political committee. C Name of Employer Baxter Healthcare Corporation Occupation Mgr II, Supply Chain Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 34.00			Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 1 / 2 0 0 6 Transaction ID: 60901.C29833 Amount of Each Receipt this Period 4.00 Receipt Payroll Deduction: (2.00/- Pay Period)
B. Full Name (Last, First, Middle Initial) Donald Sullivan Mailing Address 910 W Cypress Drive City State Zip Code Arlington Heights IL 60005 FEC ID number of contributing federal political committee. C Name of Employer Baxter International Inc. Occupation VP, Risk Management Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 680.00			Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 1 / 2 0 0 6 Transaction ID: 60901.C29886 Amount of Each Receipt this Period 80.00 Receipt Payroll Deduction: (40.00- /Pay Period)
C. Full Name (Last, First, Middle Initial) Karenann Terrell Mailing Address 1 Baxter Parkway City State Zip Code Deerfield IL 60015 FEC ID number of contributing federal political committee. C Name of Employer Baxter International Inc. Occupation CVP, Chief Information Officer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 576.93			Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 1 / 2 0 0 6 Transaction ID: 60901.C29896 Amount of Each Receipt this Period 384.62 Receipt Payroll Deduction: (192.3- 1/Pay Period)

SUBTOTAL of Receipts This Page (optional)

468.62

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

Full Name (Last, First, Middle Initial)

A. Andrew Thorrens

Mailing Address 1835 North Hoyne

City State Zip Code
 Chicago IL 60647

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter International Inc.

Occupation
Dir, Payment Planning

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

34.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 8 / 1 1 / 2 0 0 6

Transaction ID: 60901.C29889

Amount of Each Receipt this Period

4.00

Receipt

Payroll Deduction: (2.00/-
Pay Period)

Full Name (Last, First, Middle Initial)

B. Joel Tune

Mailing Address 1365 Vos Court

City State Zip Code
 Antioch IL 60002

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation
General Manager II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 8 / 1 1 / 2 0 0 6

Transaction ID: 60901.C29849

Amount of Each Receipt this Period

40.00

Receipt

Payroll Deduction: (40.00-
/Pay Period)

Full Name (Last, First, Middle Initial)

C. Onelia Vera-littrell

Mailing Address 619 Oleander Drive

City State Zip Code
 Hallandale FL 33009

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation
Asst General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1282.12

Date of Receipt

M M / D D / Y Y Y Y Y
 0 8 / 1 1 / 2 0 0 6

Transaction ID: 60901.C29882

Amount of Each Receipt this Period

153.84

Receipt

Payroll Deduction: (76.92-
/Pay Period)

SUBTOTAL of Receipts This Page (optional)

197.84

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A. Full Name (Last, First, Middle Initial)

Kenneth R Webb

Mailing Address 31385 W. Somerset Circle

City State Zip Code
 Green Oaks IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation
VP, Customer Svc & E-Commerce

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

140.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 1 1 / 2 0 0 6

Transaction ID: 60901.C29871

Amount of Each Receipt this Period

20.00

Receipt

Payroll Deduction: (10.00-
/Pay Period)

B. Full Name (Last, First, Middle Initial)

Monica Weed

Mailing Address 2026 W. Pensacola Avenue

City State Zip Code
 Chicago IL 60618

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 0 7 / 2 0 0 6

Transaction ID: 60901.C29832

Amount of Each Receipt this Period

1000.00

Receipt

C. Full Name (Last, First, Middle Initial)

Cheryl White

Mailing Address 4069 Mayfield Street

City State Zip Code
 Newbury Park CA 91320

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation
CVP, Quality

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 1 1 / 2 0 0 6

Transaction ID: 60901.C29885

Amount of Each Receipt this Period

250.00

Receipt

Payroll Deduction: (125.0-
0/Pay Period)

SUBTOTAL of Receipts This Page (optional)

1270.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A. Full Name (Last, First, Middle Initial)

Clara Williams

Mailing Address 36 3rd St

City State Zip Code
 Cleveland MS 38732

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation
Quality Assoc III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

17.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 1 1 / 2 0 0 6

Transaction ID: 60901.C29842

Amount of Each Receipt this Period

2.00

Receipt

Payroll Deduction: (1.00/-
Pay Period)

B. Full Name (Last, First, Middle Initial)

Donna Williams

Mailing Address 1886 Bowling Green

City State Zip Code
 Lake Forest IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation
VP I, Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

85.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 1 1 / 2 0 0 6

Transaction ID: 60901.C29850

Amount of Each Receipt this Period

10.00

Receipt

Payroll Deduction: (5.00/-
Pay Period)

SUBTOTAL of Receipts This Page (optional)

12.00

TOTAL This Period (last page this line number only)

7776.65

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

Full Name (Last, First, Middle Initial)

A. Rangel for Congress

Mailing Address 5575 Manhattanville Station

City State Zip Code
New York NY 10027-

Purpose of Disbursement

Candidate Name
CHARLES B RANGEL

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 15

Transaction ID: 60810.E718

Date of Disbursement

/ /

Amount of Each Disbursement this Period

0.00

Full Name (Last, First, Middle Initial)

B. Roskam for Congress

Mailing Address 423 W. Wesley

City State Zip Code
Wheaton IL 60187-

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60901.E721

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

2000.00